

May 12th. Patch in the cheek entirely healed, (see Plate I. fig. 2.) The wound in the neck is nearly closed. She can open the jaws sufficiently wide to admit solid food.

14th. She leaves town to-day in good spirits, and delighted with the result of the operation.

Although I have before often operated for immobility of the jaw, and with the happiest results, and have once removed a deformity occasioned by a hole in the cheek, by the Taliacotion method, in the New York Hospital, with perfect success, I have never before seen it necessary to combine both operations in one individual; and the gratifying termination of this long and arduous case, is a convincing proof of the excellence of the means employed, and of the power of art in repairing the ravages of disease, and in relieving its distressing consequences.

25 Park Place, New York.

N. B. A letter was received from Miss P. by the lady with whom she resided here, in which she stated her health to be excellent, the jaw to have acquired increased motion, and her friends much pleased with her improved appearance.—*July.*

ART. III. *Case of Immobility of the Jaw, successfully treated by Professor Mott's Complicated Lever, and a Modification of his Operation.* By JESSE W. MIGHELS, M. D. of Maine.

IN June last, J. T. of Hebron, Oxford County, aged twenty, called on me for advice. On examination I found that his under jaw was almost immoveably fixed to the upper, by a firm, ligamentous adhesion, extending from the cuspidatus tooth on the left side, backwards to the coronoid process. There was no lateral motion, and but a slight motion downwards. His face was badly disfigured, the left cheek being much fallen in, and the mouth drawn towards one side. Being able to separate his front teeth a little, he had conveyed his drinks between them, and by using them in masticating small portions of solid food, had worn away the upper incisors so as to leave an opening of nearly a quarter of an inch.

He had been in this situation ten years; said it was occasioned by neglected mercurial ulceration of the cheek and gums. He also informed me that it had been cut five times by eminent surgeons—twice by the late justly celebrated Professor SMITH, who, by the use of a

wooden wedge succeeded in separating his front teeth about half an inch, but that it irresistibly contracted as the wound closed. On the whole, the case too nearly resembles the one related by Professor MOTT, in No. IX. p. 102 of this Journal, to need any further description. I proposed the same operation as there described, but the patient objected to having his cheek cut through. I therefore varied the operation so as to save the cheek entire, and am induced to believe that this is an improvement worthy of notice; for, independent of its saving at least *some* pain, it leaves the face free from scars, and there is no danger of the breaking of stitches and slipping of adhesive straps during the cure.

The patient being seated in a chair in a strong light, his lips separated and firmly held by assistants, I passed a very sharp two-edged knife, flatwise, in the direction of the teeth, back to the angle of the jaw, and carefully dissected the morbid adhesion from the gums; I then turned the edge so as to cut through the hardened mass crosswise, and as far back as I could. This so far loosened the jaw as to admit the *vice* betwixt the first molar teeth, and I then expected that a trifling force would be sufficient to finish the operation, but I have no doubt that the force applied was equal to one hundred pounds, and when it yielded it was attended with an audible crash resembling the laceration of ligaments. By keeping the jaws asunder by a wooden wedge, and the cheek from the gums by a soft sponge for a few weeks, the patient completely recovered the use of this jaw and the natural shape of his face.

Minot, Maine, June, 1831.

ART. IV. *On the Adaptive Powers of the Eye.* By H. MORTON,
M. D. of New York.

THE functions of the organ of vision have engaged the attention of anatomists and physiologists to a greater extent than any other organ in the animal economy. Its general anatomy is sufficiently well understood, but its physiology, we are inclined to believe, has not kept pace with the general advancement of medical science. Its functions as a dioptical instrument, or an organ of vision, offers a considerable field for observation and experiment, and a more accurate knowledge of these functions would perhaps enable us to explain more satisfactorily a great variety of its phenomena that are now obscure. Such knowledge might also enlighten us on its pathology, both